



MILWAUKEE CITY SERVICE COMMISSION  
TRAINING AND EXPERIENCE QUESTIONNAIRE FOR  
**LIBRARIAN GRADUATE INTERN**

**Any format modification made to this document will result in immediate rejection**

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_

DAY PHONE NUMBER (\_\_\_\_) \_\_\_\_\_

EVENING PHONE NUMBER (\_\_\_\_) \_\_\_\_\_

Best time to reach by phone: \_\_\_\_\_(AM/PM)

WE URGE YOU TO MAKE COPIES OF ALL APPLICATION MATERIALS YOU SUBMIT.

**IMPORTANT:** A resume is not a substitute for this questionnaire. This questionnaire constitutes an important part of your examination. The information provided is subject to verification with your employers and will be used to select the most qualified candidates. Credit will not be given for incomplete or incorrect information and will constitute justification for disqualification from consideration for this position or removal from a city position. Please use **BLACK INK** (required for reproduction purposes).

SUBMIT WITH APPLICATION FORM TO: City of Milwaukee  
Dept. of Employee Relations  
200 East Wells Street, Room 706  
Milwaukee, WI 53202-3554

READ CAREFULLY BEFORE SIGNING: The answers to the questions on the attached pages are true and complete to the best of my knowledge. I understand that falsification of this form may result in disqualification or removal from a City position.

YOU MUST SIGN AND DATE THIS FORM.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I. EDUCATIONAL BACKGROUND

A. List below any library science college credits or degree which you have completed.

COURSE	CREDITS	SCHOOL	DATES COMPLETED

Degree: \_\_\_\_\_

B. List below human relations and other training programs you have completed which relate to the position of Librarian Graduate Intern.

DESCRIPTION OF TRAINING RECEIVED	PROGRAM SPONSOR	DATE

C. If you have received any other college or post-high school degree, complete the following:

TYPE OF DEGREE	MAJOR	SCHOOL	DATES AWARDED

II. EXPERIENCE

Supply the information required below concerning any paid or unpaid experience you have had in social and educational agencies performing services for the community and its residents. Start with your present position and work back.

A. Employer/Volunteer: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Hours per week \_\_\_\_\_  
Mo./Yr. Mo./Yr.

Address: \_\_\_\_\_

Your Title: \_\_\_\_\_

Describe your major duties and responsibilities, indicating the group or groups to whom your services were directed:

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Specifically describe any duties performed and the time involved in providing library services to the community.

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B. Employer/Volunteer: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Hours per week \_\_\_\_\_  
Mo./Yr. Mo./Yr.

Address: \_\_\_\_\_

Your Title: \_\_\_\_\_

Describe your major duties and responsibilities, indicating the group or groups to whom your services were directed:

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Specifically describe any duties performed and the time involved in providing library services to the community.

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C. Employer/Volunteer: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Hours per week \_\_\_\_\_  
Mo./Yr. Mo./Yr.

Address: \_\_\_\_\_

Your Title: \_\_\_\_\_

Describe your major duties and responsibilities, indicating the group or groups to whom your services were directed:

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Specifically describe any duties performed and the time involved in providing library services to the community.

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D. Employer/Volunteer: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Hours per week \_\_\_\_\_  
Mo./Yr. Mo./Yr.

Address: \_\_\_\_\_

Your Title: \_\_\_\_\_

Describe your major duties and responsibilities, indicating the group or groups to whom your services were directed:

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Specifically describe any duties performed and the time involved in providing library services to the community.

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### III. ADDITIONAL INFORMATION

Describe any other background experience, training, or community involvement you have had which you think qualifies you for Librarian Graduate Intern.

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